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REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Gee

MECEIVED
FEDERAL ELECTION
COMMISSION
PUBLIC DISCLOSURE
DISCLOSURE
2015 APR -6 AM 9: 52

NAME OF COMMITTEE (in full)	TYPE OR PRINT ▼	Example: If typing, typover the lines.	e 12FE4M5		
Single Sub	ject Amend	lmenti.		•	
	<i>,</i>		1 1 1 1 1 1 1 1		
ADDRESS (number and street)	267 John	Knox Rd	Sulite 1,00		
Check if different than previously					
reported. (ACC)	Tallahass	e_1e_1	FL 32310	18 -L	
2. FEC IDENTIFICATION N	IUMBER ▼ CI	ΓΥ▲	STATE ▲ ZIF	CODE A	
C0.0.5.4.2.6	9 /	S THIS NEW (N)	OR (A)		
4. TYPE OF REPORT (Choose One)	(b) Monthly Feb	20 (M2) May 20	O (M5) Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)	
(a) Quarterly Reports:	Due On: Ma	7 20 (M3) Jun 20	(M6) Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)	
April 15 Quarterly Report (20 (M4) Jul 20	(M7) Oct 20 (M10)	Jan 31 (YE)	
July 15 Quarterly Report	Q2) (C) 12-Day PRE-Election	Primary (12P)	General (12G)	Runoff (12R)	
October 15 Quarterly Report (Heport for the:	Convention (12C)	Special (12S)		
January 31 Year-End Report	YE) Election	on on		tate of	
July 31 Mid-Year Report (Non-elect Year Only) (MY)	(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
Termination Report (TER)		Thermallingoull Pronouthern	J L s	tate of	
5. Covering Period	(24 207	through	7.2/3./ 2.0.7		
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.					
Type or Print Name of Treasu	er <u>00. 2 p. 1 d.</u>	er web, or			
Signature of Treasurer	uswebby	THE STATE OF THE S	Date 03 27	2014	
NOTE: Submission of false, erro	neous, or incomplete information	on may subject the person sig	gning this Report to the penalties	 _	
Use Only Use				FORM 3X 12/2004	